

APPLICATION FOR EAGLE TOWNSHIP PLANNING COMMISSION APPOINTMENT

This application will provide the information to be considered during the appointment process. Please return this application to the Eagle Township Supervisor. Email using the subject line "Planning Commission Member Application" to:

Supervisor@eagletownship.org, Fax (517) 626-2351, or mail 10388 W Herbison Rd, Eagle, MI 48822. Please print or type.

APPLICANT INFORMATION

Name:

Daytime Phone: Other Phone: Occupation:

Current address:

City: State/Zip: Years at Current Address:

Email: Have you ever been convicted of a felony? Yes No If yes, please explain:

Currently Business Owner/Property Owner in Eagle Township: Yes No Briefly describe:

INTEREST/QUALIFICATIONS

Education:

Able to attend regular meetings & receive training: Yes No Hours available/month:

Select and briefly describe your knowledge/experience in all of the following that apply:

Agricultural Natural Resources Recreation Education Public Health Government
 Transportation Manufacturing/Industrial Commerce/Finance/Business

Explain related experience/qualifications/training for zoning/planning (continue on back if needed):

Related community experience/activities (continue on back if needed):

Reasons you want to be part of the Eagle Township Planning Commission (continue on back if needed):

CERTIFICATION/ SIGNATURE

I certify there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me are true and complete.

I further agree and consent, in advance, that any misrepresentation or falsification of any of the above information shall be cause for immediate rejection of this application or termination of appointment, at the sole discretion of the Township Board.

I also consent for any Eagle Township Board member to verify the information I have provided.